

STATE OF WISCONSIN
DEPARTMENT OF WORKFORCE DEVELOPMENT
AND
DEPARTMENT OF HEALTH AND FAMILY SERVICES
CIVIL RIGHTS COMPLIANCE PLAN
for Counties and Other Municipalities

Affirmative Action, Equal Opportunity, and Limited English Proficiency Plan

**For the requirements of
the U.S. Department of Health and Human Services
and the U.S. Department of Agriculture.**

Instructions and Format

Effective January 1, 2004 to December 31, 2006
http://www.dwd.state.wi.us/dws/civil_rights/cr0406/cr_plans.htm

Note: If you are a person with a disability and need to access this document in another format, please contact: DWD at (608) 264-9820, elayne.moore.dwd.state.wi.us or DHFS at (608) 266-3356, cruze@dhfs.state.wi.us

DWSD-12997 (R. 11/2003)

**Departments of Workforce Development
and Health and Family Services
Civil Rights Compliance Plan**

INSTRUCTION and FORMAT

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**STATE OF WISCONSIN
DEPARTMENT OF WORKFORCE DEVELOPMENT
and
DEPARTMENT OF HEALTH AND FAMILY SERVICES**

**CIVIL RIGHTS COMPLIANCE PLAN
for Counties and Other Municipalities
including
Affirmative Action, Equal Opportunity and Limited English Proficiency**

**For the Requirements of the U.S. Department of
Health and Human Services (DHHS) and U.S. Department of Agriculture (USDA)**

INSTRUCTIONS and FORMAT

I. PURPOSE AND REQUIREMENTS

This document provides instructions for completing the Civil Rights Compliance (CRC) Plan¹ for the period of January 1, 2004 to December 31, 2006. The Plan includes the Affirmative Action, Equal Opportunity and Limited English Proficiency (LEP) requirements. These requirements address the programs administered by the Department of Workforce Development (DWD) and the Department of Health and Family Services (DHFS). In DWD, the Division of Workforce Solutions (DWS) administers these programs.

The Plan reflects the cooperation between DWD and DHFS. Many counties and other municipalities are funding recipients of both DWD and DHFS. By jointly issuing these Plan requirements, workload will be simplified for those recipients. DWD and DHFS also work cooperatively on the provision of civil rights monitoring, technical assistance, training and complaint processing.

Compliance with the Plan will enable DWD and DHFS funding recipients and subcontractors to meet civil rights requirements in service delivery and employment as specified by the U.S. Department of Health and Human Services and the Department of Agriculture. Monitoring conducted by DWD and DHFS will use the CRC Plan as the basis for on-site and desk reviews.

II. APPLICABLE LAWS

This document supports requirements in the following state and federal laws, regulations and guidelines:

¹ A Civil Rights Compliance Plan has three sections: (1) Strategies and Recruitment Action Plan, (2) Equal Opportunity and (3) Limited English Proficiency. Civil Rights responsibilities for a recipient of federal financial assistance as an Employer are covered under Title VII of the Civil Rights Act of 1964, ADA Title I, the Wis. Fair Employment Law, and other applicable laws. Civil Rights responsibilities of the recipient of federal financial assistance as a Service Provider are covered under Title VI of the Civil Rights Act, ADA Titles II, III and IV and other applicable laws.

<ul style="list-style-type: none"> • 42 USC s.6103, Age Discrimination in Public Health and Welfare, last amendment in 1996. 	<ul style="list-style-type: none"> • Equal Employment Opportunity Commission's Guidelines to Discrimination Because of Religion, issued 1967 and amended 1980.
<ul style="list-style-type: none"> • Age Discrimination in Employment Act of 1967. 	<ul style="list-style-type: none"> • Omnibus Budget Reconciliation Act of 1981.
<ul style="list-style-type: none"> • Americans with Disabilities Act of 1990. 	<ul style="list-style-type: none"> • Public Health Services Act, Titles VI and XVI.
<ul style="list-style-type: none"> • Titles VI and VII, Civil Rights Act of 1964. 	<ul style="list-style-type: none"> • Rehabilitation Act of 1973, ss. 503 and 504.
<ul style="list-style-type: none"> • Civil Rights Restoration Act of 1987. 	<ul style="list-style-type: none"> • Equal Pay Act of 1963.
<ul style="list-style-type: none"> • Civil Rights Act of 1991. 	<ul style="list-style-type: none"> • Executive Order 11246, as amended, Affirmative Action.
<ul style="list-style-type: none"> • Education Amendments of 1972, Title IX. 	<ul style="list-style-type: none"> • Chapter 230, Wis. Stats.
<ul style="list-style-type: none"> • Equal Employment Opportunity Commission's Guidelines to Discrimination based on National Origin, issued 1970, amended 1980. 	<ul style="list-style-type: none"> • Wisconsin Fair Employment Act, Chapter 111, Subchapter II, Wis. Stats.
<ul style="list-style-type: none"> • Executive Order 13166, Limited English Proficiency Guidelines. 	<ul style="list-style-type: none"> • Wisconsin Contract Compliance Law, Chapters 16.765, 111.32, and 51.01(5), Wis. Stats.
<ul style="list-style-type: none"> • Equal Employment Opportunity Commission's Guidelines to Discrimination Based on Sex, issued 1965, amended 1980. 	

III. PLAN SUBMITTAL AND APPROVAL

A. Number of Employees:

For purposes of determining whether the recipient needs to submit a CRC Plan or a Letter of Assurance, use the number of employees (including full time, part-time, and seasonal) on the recipient's payroll as of the date the recipient signs its State of Wisconsin contract.

B. Cover Page:

The cover page must be submitted for either the CRC Plan or the Letter of Assurance.

C. One Plan:

Each County or other municipality must submit one Plan for all programs covered by the DWD and DHFS. If the County or other municipality is not able to coordinate the submission of one Plan by the due date, the County or other municipality may submit separate plans by the due date and provide, in the cover letter that accompanies the plans, the steps with milestones the county or other municipality will undertake to achieve coordination during this Plan cycle. If a County or other municipality has 25 or more employees in total, no part of the county or other municipality may submit a Letter of Assurance in lieu of a complete Plan.

D. Submission of Civil Rights Compliance Plan including Due Date:

Counties and other municipalities that have 25 or more employees and receive \$25,000 or more in federal and state revenues must submit a three-year CRC Plan within 45 calendar days of the publication of these instructions, or in accordance with required due dates contained in the entity's contract with DHFS or DWD effective January 1, 2004, whichever is later. If the contract does not specify a due date, the CRC Plan is due no later than 30 calendar days after the signing of the contract by the recipient.

E. Submission of Letter of Assurance including Due Date:

Counties and other municipalities that have fewer than 25 employees or receive less than \$25,000 in funding may complete the Letter of Assurance that contains their Affirmative Action, Equal Opportunity, and Limited English Proficiency policies in lieu of a CRC plan. A copy of a model Letter of Assurance is provided in Attachment IV of the Civil Rights Compliance Plan. The Letter of Assurance is due in accordance with required due dates contained in the entity's contract or within 45 calendar days of the publication of these instructions, whichever is later. If the contract does not specify a due date the CRC Plan is due no later than 30 calendar days after the signing of the contract by the recipient. The Executive Director must sign the Letter of Assurance.

F. Submission to DWD and DHFS:

A recipient of funding from both DWD and DHFS must send both departments a copy of its CRC Plan. Submission should be addressed to the individuals or DWD Regional Office designated below. Names, e-mail addresses and other contact information are given under Part IV on Technical Assistance.

Completed CRC Plans or Letters of Assurance shall be submitted to:

- The appropriate DWD Division of Partner Services Regional Office.
- David Duran, DHFS Civil Rights Compliance Officer.

G. Submission of Updates:

Each county or other municipality is responsible for updating its CRC Plan annually and maintaining the updates on file and submitting updates as required by DHFS and DWD.

H. Responsibility for Subcontractors:

Counties and other municipalities are responsible for developing and maintaining any subcontracts they issue in accordance with the requirements of DWD or DHFS contracts. Recipients who subcontract must:

- Incorporate State AA/EO/LEP language into subcontracts.
- Require subcontractors to submit a CRC Plan to the recipient.
- Review and approve subcontractor plans in accordance with requirements of subcontract time periods. (DWD and DHFS recommend that recipients have their subcontractors use the applicable CRC Plan format for their plans).
- Monitor subcontractor compliance.

- Investigate complaints of their employees, subcontractors, applicants, and participants in service delivery.
- Provide training, tools and technical assistance to subcontractors.

Counties and other municipalities do not need to require a subcontractor to submit a separate Plan to them if the subcontractor is a DHFS or DWD funding recipient with an approved Plan. To determine if a DHFS funding recipient has an approved Plan, please contact David Duran at durand@dhfs.state.wi.us. To determine if a DWD funding recipient has an approved Plan, please contact elayne.moore@dwd.state.wi.us.

I. Format:

DWD and DHFS require the counties and other municipalities to use the format provided in these instructions. If the recipient has written policy statements on Affirmative Action, Equal Opportunity or Limited English Proficiency that are different from those attached to this Plan, the recipient may submit them in lieu of the models given in Attachments I to IV. Please note that your policy must refer to all the protected groups under the federal and state laws.

Electronic submission of the CRC Plan is acceptable; however, the cover pages and all signature pages in the Plan must be sent within five working days of the submission of the electronic copies to DWD and/or DHFS.

J. Approval:

Plan approval given by either DWD or DHFS will be accepted as an approval by the other department. The Letter of Approval or any follow-up action required will be issued to the recipient agency's Executive Director. Approval of a recipient's Plan by DWD or DHFS will be deemed as fulfilling the requirements.

IV. TECHNICAL ASSISTANCE

A. Department of Workforce Development/Division of Workforce Solutions:

DWS Regional Offices: For assistance from DWD, contact the DWS Area Administrator or Acting Area Administrator or the Contract or Grant Administrator for your location.

<p>Ashland Regional Office JoAnn Schmidt, Area Administrator (AA) 411 Ellis Avenue, PO Box 72 Ashland, WI 54806-0072 PHONE: (715) 682-7249 FAX: (715) 682-7289</p>	<p>COUNTIES: Adams, Ashland, Bayfield, Burnett, Douglas, Forest, Iron, Langlade, Lincoln, Marathon, Oneida, Portage, Price, Rusk, Sawyer, Taylor, Vilas, Washburn and Wood. TRIBES: Bad River, Lac Courte Oreilles, Lac du Flambeau, Potawatomi, Red Cliff, St. Croix and Sokaogon.</p>
<p>Eau Claire Regional Office Jo Kutzner, Acting AA 221 West Madison, Suite 218 Eau Claire, WI 54703-4404 PHONE: (715) 836-2264 FAX: (715) 830-7741</p>	<p>COUNTIES: Barron, Buffalo, Chippewa, Clark, Crawford, Dunn, Eau Claire, Jackson, Juneau, La Crosse, Monroe, Pepin, Pierce, Polk, St. Croix, Trempealeau and Vernon. TRIBES: Ho Chunk.</p>

<p>Green Bay Regional Office Susan Rogers, Acting AA 200 N. Jefferson, Suite 428 Green Bay, WI 54301</p> <p>PHONE: (920) 448-5315 FAX: (920) 448-5306</p>	<p>COUNTIES: Brown, Calumet, Door, Florence, Fond du Lac, Green Lake, Kewaunee, Manitowoc, Marinette, Menominee, Oconto, Outagamie, Shawano, Sheboygan, Waupaca, Waushara and Winnebago.</p> <p>TRIBES: Menominee, Oneida and Stockbridge-Munsee.</p>
<p>Madison Regional Office Christina Martin, Acting AA ECB Building, Room E234 3319 W. Beltline Madison, WI 53713-2834</p> <p>PHONE: (608) 267-1484 FAX: (608) 267-1411</p>	<p>COUNTIES: Columbia, Dane, Dodge, Grant, Green, Iowa, Jefferson, Lafayette, Marquette, Richland, Rock and Sauk.</p> <p>TRIBES: No tribes.</p>
<p>Milwaukee Regional Office Brenda Bell-White, AA 891 North 6th Street, 6th Floor Milwaukee, WI 53203</p> <p>PHONE: (414) 227-4245 FAX: (608) 267-2200</p>	<p>COUNTY: Milwaukee.</p> <p>TRIBES: No tribes.</p>
<p>Waukesha Regional Office Karen Messinger, Acting AA 141 Northwest Barstow St., Rm 157 Waukesha, WI 53188-3789</p> <p>PHONE: (262) 521-5090 FAX: (262) 521-5293</p>	<p>COUNTIES: Kenosha, Ozaukee, Racine, Walworth, Washington and Waukesha.</p> <p>TRIBES: No tribes.</p>

NOTE: To access the most up-to-date information on Regional Offices see the List of Resources.

Division of Workforce Solutions/Civil Rights Unit

<p>William Franks, Equal Opportunity Officer (608) 266-6889 william.franks@dwd.state.wi.us</p>	<p>ADDRESS:</p> <p>Department of Workforce Development Division of Workforce Solutions Bureau of Division-Wide Services Human Resources Section/Civil Rights Unit 201 E. Washington Ave., Room A200 PO Box 7972 Madison, WI 53707-7972</p> <p>TTY: (866) 864-4585 (Toll Free)</p>
<p>Elayne Moore, Civil Rights Compliance Assistant (608) 264-9820 elayne.moore@dwd.state.wi.us</p>	
<p>Earnestine Moss, Equal Opportunity Specialist (608) 266-5335 earnestine.moss@dwd.state.wi.us</p>	

B. Department of Health and Family Services/Affirmative Action and Civil Rights Office:

Evelyn Cruz, Bilingual/LEP Coordinator (608) 266-3356 Cruze@dhfs.state.wi.us	ADDRESS: Department of Health and Family Services Office of Affirmative Action and Civil Rights Compliance 1 West Wilson, Room 555 PO Box 7850 Madison, WI 53707-7850 TTY: (608) 266-2555 FAX: (608) 267-2147
David Duran, Civil Rights Compliance Officer (608) 266-9372 durand@dhfs.state.wi.us	

V. DEFINITIONS

The following definitions are in effect for the purposes of this document:

“Balanced Workforce” means an equitable representation of persons with disabilities, minorities and women available for jobs at each job category from the relevant labor market from which the recipient recruits job applicants.

“Civil Rights Compliance Plan” includes the description of a recipient’s Affirmative Action, Equal Opportunity and Limited English Proficiency policies and procedures.

“Disability” means with respect to an individual:

- a) physical or mental impairment that substantially limits one or more of the major life activities, or
- b) a record of such an impairment, or
- c) being regarded as having such an impairment.

“Employee” means anyone who has received any wages for work directly performed for an employer. If an “employee” receives payment from a contract agency that provides work for the employer, that individual is considered the employee of the contract agency.

"Ethnic Categories" based on Office of Management and Budget (OMB) requirements are as follows:

- a) Hispanic/Latino: A person of Cuban, Mexican, Puerto Rican, South/Central American, or other Spanish culture or origin, regardless of race. Includes persons from the Dominican Republic.
- b) Not Hispanic/Latino: A person who is not of Cuban, Mexican, Puerto Rican, South/Central American, or other Spanish culture or origin, regardless of race.

See also "Race Categories". For the purpose of this plan, data in Ethnic and Race Categories are combined under the heading "Minorities."

“Interactive Voice Response (IVR System)” means an automated system that enables callers to obtain and provide information over the telephone in English and other languages.

“Job Category” means a broad-based group of employees with comparable job responsibilities that are located at comparable levels of responsibility within an organization:

- a) Officials and Managers: Occupations requiring administrative and managerial personnel who set broad policies, exercise overall responsibility for execution of these policies, and direct individual departments or special phases of a recipient's operations.
- b) Professionals: Occupations requiring either college graduation or experiences of such a kind and amount as to provide a comparable background.
- c) Technicians: Occupations requiring a combination of basic scientific knowledge and manual skill which can be obtained through 2 years of post high school education, such as is offered in many technical institutions and junior colleges or through equivalent on-the-job training.
- d) Sales Workers: Occupations engaging wholly or primarily in direct selling.
- e) Office and Clerical Workers: Includes all clerical type work regardless of level of difficulty, where the activities are predominantly nonmanual although some manual work not directly involved with altering or transporting products is included.
- f) Craft Workers (Skilled): Manual laborers of relatively high skill level who have a thorough and comprehensive knowledge of the processes involved in their work. They exercise considerable independent judgment and usually receive an extensive period of training.
- g) Operatives (Semiskilled): Workers who operate machines or processing equipment or perform other factory-type duties of intermediate skill levels which can be mastered in a few weeks and which require only limited training.
- h) Laborers (Unskilled): Workers in manual operations which generally require no special training to perform elementary duties that may be learned in a few days and require the application of little or no independent judgment.
- i) Service Workers: Workers in both protective and nonprotective service occupations.

“Job Group” means a cluster of jobs with very similar functions, usually more precise than the job categories, that the recipient may define. Examples of job groups are nurses, resident technicians, and job counselors.

“Labor Market” means the geographic area in which the recipient recruits applicants for employment. The labor market may be different for various categories or groups of employees. For example, the recipient may recruit laborers from the city in which the recipient is located and professionals on a regional or statewide basis.

“Language Group” means a group of potential or actual recipients of service who speak a language other than English.

“Language Line” means a service provided by a vendor who offers accurate and reliable telephone on-line interpretation services. Most vendors have interpreters for a large number of languages spoken by LEP speakers in Wisconsin. In general, the language line fees are

assessed by the minute and billed to the user's telephone service. We encourage you to develop a Request for Proposal for a qualified vendor or piggy-back on the DWD Bulletin for this service. A bidding process may result in a reasonably priced contract with a language line vendor.

<http://vendornet.state.wi.us/vendornet/aspbin/bulshownigp.asp?BulletinID=1354>.

“Limited English Proficiency (LEP)” means those customers who cannot speak, read, write, or understand the English language at a level that permits them to access program services and benefits in a meaningful way.

“Major LEP Language Groups” in Wisconsin on a statewide basis for the period of January 1, 2004 to December 31, 2006, are Spanish and Hmong. Certain areas may serve other communities whose primary languages are, among others, Laotian, Russian, Arabic, Albanian, Vietnamese, Mandarin, Bosnian/Croatian/Serbian, and Somali.

“Minorities” means persons whose race is not White alone or whose ethnicity is Hispanic/Latino.

“Municipality” means a Wisconsin county, city, village, town, school district, board of school directors, sewer district, drainage district, vocational, technical and adult education district or any other public or quasi-public corporation officer, board or other body having the authority to award public contracts.

“Qualified Interpreter” means an individual who is able to provide the following: demonstrated proficiency in English and the second language; demonstrated knowledge in both languages of relevant specialized terms and concepts; and demonstration of completion of training on the skills and ethics of interpretation.

“Race Categories” based on OMB requirements are as follows:

- a) Black/African American or African: A person having origins of any of the black racial groups of Africa. Includes Haitians and other persons of African origin from the West Indies who are not Hispanic/Latinos.
- b) American Indian or Alaska Native: A person descending from any of the original peoples of North, South or Central America who possess ¼ degree of documented tribal descendancy or is enrolled with a federally and state recognized tribe.
- c) Asian: A person having origins in any of the original people of the Far East, Southeast Asia, or the Indian Subcontinent.
- d) Native Hawaiian or Other Pacific Islander: A person having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands.
- e) White: A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.
- f) More Than One Race: A person designating more than one of the racial groups above.

See also "Ethnic Categories." For the purpose of this Plan data from Ethnic and Race Categories are combined under the heading "Minorities."

“Recipient” means a public, private or private non-profit entity receiving funds directly from the Department of Workforce Development (DWD) or the Department of Health and Family Services (DHFS) under contract, grant, or other agreement.

“Safe Harbor” means the federal Department of Health and Human Services (DHHS) guidelines that permit a recipient to determine that a written translation is required in order to be in compliance with Title VI of the Civil Rights Act. The following are the safe harbor guidelines:

- a) Written translation of the agency’s vital documents will be provided for each frequently encountered LEP group that constitutes an LEP population of 5%, who are served or likely to be encountered within the recipient’s service area, or 1,000 individuals, whichever is less.
- b) If the language group (5% or more of the individuals served or likely to be encountered) represent totals fewer than 50 persons the recipient does not need to translate vital written materials, but must provide written notice in the primary language of the LEP group of their right to oral interpretation of those written materials, free of cost.

“Service Area” means the geographic area from which customers for your service are drawn (e.g., county-wide, multi-county).

“Subcontractor” means a public, private, or private non-profit entity receiving funds from a recipient.

“Telecommunications Device for the Deaf (TDD)” is an electronic text telephone device used by the deaf, hard of hearing or speech impaired persons to communicate with hearing and non-hearing individuals. The TDD consists of a keyboard, a display screen, and a modem. The letters that are typed in the TDD machine are turned into electrical signals that can travel over regular telephone lines to a second TDD machine that converts the signals into text on the monitor. The TDD connection requires both devices to be text phones. Each area code has a TDD phone number that a deaf, hard of hearing or a speech impaired person can use (i.e., in the 608 area code, the number is 266-1111). An equivalent acronym for this device is “TTY.”

“Title VI of the Civil Rights Act of 1964, 42 U.S.C. 2000d, et seq.” means the law that protects individuals from discrimination based on their race, color, or national origin under any program or activity that receives federal financial assistance. The implementing regulation is at 45 CFR Part 80.

“Under-Representation” means the recipient’s workforce does not approximate the percentage of women, minorities, or persons with disabilities for jobs in any particular job group or category from the relevant labor market in which the recipient recruits.

“Video Relay System” means a system that allows a deaf or hard of hearing consumer to communicate in sign language through a real-time sign interpreter via a computer with a video camera using video conference capabilities. The sign language interpreter signs the telephone conversation to the consumer in a visual format and relays a voice response to the hearing person using a standard telephone.

“Vital Documents” means any paper or electronic form, that contains information that is critical for accessing the recipient’s programs, services or benefits; letters or notices that require a response; letters and notices pertaining to approval, denial, reduction, or termination of services or benefits, and documents that inform participants of free language assistance.

“Wisconsin Telecommunications Relay System” is the system that allows a text telephone user who may be deaf, hard of hearing, or speech impaired to call or be called by virtually anyone using a voice phone. Communication between text and voice phones is bridged through a telephone operator. Calls are confidential. Spanish is available in Wisconsin.

VI. INSTRUCTIONS FOR USING THE PLAN FORMAT

Cover Page

CRC Plan: Fill in ALL the blanks on the cover page. Identify the name and address of the recipient of federal financial assistance that this Plan covers. Identify the Equal Opportunity (EO) Coordinator, Limited English Proficiency (LEP) Coordinator and Executive Director with contact information. Be sure to show their names in print as well as include their signatures.

Important: Please provide your e-mail address(es) as we use e-mail to communicate training opportunities and policy updates.

Letter of Assurance: If you have fewer than twenty-five (25) employees or receive less than twenty-five thousand (\$25,000) dollars, please use the instructions given in this manual for submitting a Letter of Assurance. Attach the cover page to the completed Letter of Assurance

Programs Covered by the Plan

Check the appropriate programs you administer that are funded by DWD and/or DHFS. Write the specific program or grant that you administer that receives federal and/or state funding if not included in the chart.

Civil Rights Compliance Plan for Counties and Other Municipalities

A. Data Collection:

In order to effectively complete a CRC Plan the recipient must have access to data concerning employees and program participants. Based on a review of previous plans and technical assistance provided, the following three areas of data collection require particular emphasis.

1. **Aggregate number of the recipient’s employees with disabilities.** The recipient must have a data collection system that will report the aggregate number of its employees with disabilities. Information on the disability of an individual employee is confidential and voluntary. However, reporting only the aggregate number without individual employee identification does not violate confidentiality requirements. There is no need to break down the aggregate number of employees with a disability into job categories. Examples of data collection systems used by DWD and DHFS for this purpose are available at: http://www.dwd.state.wi.us/dws/civil_rights/cr0406/cr_plans.htm.
2. **Race and ethnicity of employees and participants**². Recent changes in data collection requirements have resulted in a separation of data about ethnicity (i.e., Hispanic/Latino or not Hispanic/Latino) from data on race. In some cases, this will make comparisons difficult

² See definitions of race and ethnicity categories in Section V definitions

because older data collection systems included Hispanic/Latino as a racial group. The recipient must have a system to report the race and ethnicity of its employees and participants.

a) The ethnicity codes required by the federal OMB are:

- Hispanic/Latino;
- Not Hispanic/Latino.

b) The race codes required by the federal OMB are:

- African American or African;
- American Indian or Alaska Native;
- Asian;
- Native Hawaiian or other Pacific Islander;
- White; and
- More Than One Race.

3. Primary Language and Accommodations. The recipient must have a data collection system that records:

a) The oral interpretation needed by and provided for each LEP participant served.

b) A listing of written translations of vital documents for Limited English Proficiency (LEP) language groups whose population size is within the federal DHHS Office for Civil Rights “safe harbor” guidelines³.

c) The Sign Interpretation needed by and provided for deaf and hard of hearing participants.

d) The accommodations needed by and provided for other participants with disabilities so they may benefit from the agency’s programs and services in a meaningful way.

B. Affirmative Action:

1. Workforce Analysis. The purpose of the Workforce Analysis is to compare your workforce with the available labor market in your area to determine if women, minorities and persons with disabilities are represented in your workforce in at least as great a proportion as their representation in the available labor market. Labor market information is available at <http://www.dwd.state.wi.us/lmi/affirm.htm>.

a) A negative variance means that your workforce does not reflect the composition of the qualified labor market in your service area, and that you will need to develop an affirmative action strategy to balance your workforce. The higher the negative variance, the bigger the gap between the qualified labor market and your workforce.

b) A positive variance means that your agency has exceeded the labor market representation of the target group in your area. You do not have to develop a written affirmative action strategy for a job group with a positive variance.

2. Recruitment Strategies and Action Plan to Address Variance. If there is a negative variance in your workforce for a particular job group, identify the action steps, including

³ See “safe harbor” in Section V Definitions

recruitment strategies to assist in achieving a balanced workforce (i.e., one that reflects the labor market in the agency's service area). Action steps may be developed for short-term and long-term goals. Initiation and completion dates must be aggressively planned to assure compliance within the life of the contract.

Recruitment plans may differ for different job groups. For example, you may recruit within your immediate service area for administrative support vacancies, with a regional recruitment for professional vacancies, but with a statewide or nationwide recruitment for a director vacancy.

C. Equal Opportunity Requirements:

1. Customer Service Population Analysis. The purpose of the Customer Service Population Analysis is to determine if you are serving customers in the same proportion they are represented in the eligible population. To complete the customer service population analysis, fill in ALL the blanks. Use the format provided in the Plan. Please note that there will be multiple counts for minorities, persons with disabilities, and women since one individual may have more than one of these characteristics. You do not have to correct for duplication. A separate Customer Service Population analysis form should be completed for each program.

- a) To complete this analysis you must first determine what segment of the county or a multi-county area best represents your potential customers. For example, you may operate a facility and program that is open to the entire population of the county. Or, your programs and services may be limited to an eligible population of a certain age or income group.

- b) Following are data sources that may be useful in this analysis:

- Census information is available at the following websites:

<http://www.doa.state.wi.us/dhir/boir/demographic/>

This is the Wisconsin Department of Administration, Division of Intergovernmental Relations link to the U.S. Census and population information data, i.e., Demographic Service Center Home, Census 2000 Basic Data, Demographic Services Center Staff, etc.

<http://www.census.gov/>

This is the U.S. Census Bureau, United State Department of Commerce Home Page. To get to the census data by county select "American FactFinder". Then choose one of the items from the "Show Me" drop-down list under "Basis Fact". After identifying the state and county, click on GO.

<http://www.dwd.state.wi.us/lmi>

This is DWD's link to Labor Market Information. Data from this site under the heading of "Affirmative Action" will be helpful in completing this plan.

- Human Services Resource System (HSRS): DHFS provides access to HSRS Excel File in <http://www.dhfs.state.wi.us/civilrights/CRC/HRSA-Disability.xls>. The database contains information beginning with the Year 2000 regarding participants served or currently being served in AODA, Mental Health, Physical Disabilities, Developmental Disabilities, and the Elderly programs. This database does not have a count for participants who are on a waiting list.

- Client Assistance for Re-employment and Economic Support (CARES): Race and ethnicity data are collected by CARES.⁴ CARES covers Wisconsin Works (W-2), Food Stamps, Medical Assistance and Child Care programs. It also contains some data on Child Support.
- DWD Division of Vocational Rehabilitation (DVR). DVR provides data on persons with disabilities who are actively looking for work. <http://www.dwd.state.wi.us/dvr/>

c) Points to consider in the summary of the customer analysis:

- The variance between the population served and the population eligible to be served in your service area must be calculated. The Plan gives definitions and the formulas for the percentages and variance.
- Any percentage that is less than 2% is not statistically significant.
- A negative variance of more than 2% means that you are not reaching traditionally underserved but eligible populations in your service area. If so, you must plan and take steps to correct the variance, such as developing a training program for staff that includes the development of staff's linguistic and cultural competencies when providing services, and increasing outreach. (See components necessary to set up an LEP program.)
- A positive variance means that your agency is meeting the needs of the communities in your service area.

2. Equal Opportunity Policy Statement and Notification. Every recipient must have an Equal Opportunity Policy Statement that describes the Civil Rights responsibilities of the recipient as both an employer and a service provider. If using the model Equal Opportunity Policy Statement provided in Attachment I, attach it to your Plan, including all translations needed in accordance with your agency's LEP requirements for vital document translation in your service area for all entities in Wisconsin. You are encouraged to use this model statement and the translations as provided in Attachment I. Translations of the model into additional languages are available on the DWS CRC web site at: http://www.dwd.state.wi.us/dws/civil_rights/default.htm.

⁴ Source: BWP/BIWA Operations Memo, No. 02-74, 12/30/02, Changes to Procedures for Entering Information About Race and Ethnicity in CARES; Related Policy Guidelines.

If not using the model Equal Opportunity Policy Statement and translations, submit your agency's Equal Opportunity Policy Statement as Attachment I of your Plan. It must include the same information as the model, including non-discrimination towards protected groups covered under federal and state laws. It must be provided in the languages applicable to your agency's LEP requirements for vital document translation in your service area. Copies of the completed and signed policy must be posted for the public.

3. Designation of Equal Opportunity Coordinator. Each recipient must identify an individual to function as the Equal Opportunity Coordinator. In the event of a change in the recipient's Equal Opportunity Coordinator (EOC), the recipient must notify either DWD or DHFS of the new or acting EOC within (10) calendar days of the change.
4. Access to Services. Recipients are responsible to assure that both their facilities and programs are accessible to persons with disabilities. Information about the elimination of physical barriers in facilities that serve persons with disabilities is available. Compliance with ADA Accessibility Guidelines (ADAAG) is necessary for any new building or any renovation a recipient may undertake to an existing building. <http://www.access-board.gov/adaag/html/adaag.htm#purpose>.

http://www.dhfs.state.wi.us/civilrights/CRC/WI_Access.doc provides a facility assessment checklist for your use that includes both the Wisconsin Building Codes requirements and the ADAAG. The facility assessment should be treated as a record to be kept in the recipient's files, available for a desk review or an on-site visit by DWD and/or DHFS.

5. Discrimination Complaint/Grievance Procedures. The recipient must develop and implement an effective system for handling complaints and grievances. If using the model Discrimination Complaint Form and Process provided in Attachment III, of the Civil Rights Compliance Plan, attach it to your Plan, including all translations needed in accordance with your agency's LEP requirements for written translation of vital documents in your service area. You are encouraged to use this model Discrimination Complaint Forms and Process and the translations as provided in Attachment III of the Civil Rights Compliance Plan. Translations of the complaint form in additional languages are available on the DWS CRC Website.

If not using this model Discrimination Complaint Forms and Process and translations, submit your agency's Discrimination Complaint Form and Process as Attachment III of your Plan. It must include the same information as the model, and it must be provided in the languages applicable to your agency's LEP requirements for written translation of vital documents in your service area. Copies of the policies that are posted for the public must be completed and signed.

6. Self-Evaluation. The Plan provides a list of the minimum requirements for an annual self-assessment.

D. Limited English Proficiency (LEP) Requirements:

The purpose of the Limited English Proficiency Analysis is to determine which language groups are present in your service area, the degree to which members of these language groups are being served and the steps being taken to improve language access to services and programs.

1. Federal LEP Guidelines for Language Access Requirements. As a recipient of federal financial assistance, you are required to establish a language access policy and plan. The US Department of Health and Human Services has revised its LEP guidelines (August 2003). These revised guidelines are based on a four-factor analysis that helps an agency determine what is reasonable and necessary language access.

The four factors are:

- a) The number or proportion of LEP persons eligible to be served or likely to be encountered by the program or grantee;
- b) the frequency with which LEP individuals come in contact with the program;
- c) the nature and importance of the program, activity, or service provided by the program to people's lives; and
- d) the resources available to the grantee/recipient and costs.

Prior to completing the four-factor analysis for your agency, please read the revised DHHS LEP Guidelines at: <http://www.hhs.gov/ocr/lep/revisedlep.html>

2. Types of Language Access.

- a) **Oral Interpretation:** You are required to provide an LEP participant with an oral interpreter free of charge if you are requested to provide one. This is the most immediate need among the LEP communities. We strongly encourage that there be an effort to find qualified interpreters who are also competent in the culture of the LEP participant and to partner with community-based organizations that serve LEP populations.

Written Notice to the right of oral interpretation: You are required to provide written notice in the primary language of the LEP language group, of the right, free of charge, to receive culturally competent oral interpretation necessary to ensure effective communication. This applies to LEP language groups that are likely to be encountered by programs in the service area. A language group is identified when the individuals who do not speak English but speak another language represent 5% of the service population.

Important: As a service provider, you may not request that a family member or a friend act as the oral interpreter for any of the services you provide, unless the participant wants no other interpreter. As with the use of any non-professional interpreter, the recipient must consider issues of competence and appropriateness. Recipients should take into consideration issues of accuracy, conflict of interest, and confidentiality when determining whether the service provider should respect the desire of the LEP person to use an interpreter of his/her own choosing. For these reasons, it would be wise to have your own qualified interpreter present. No minor may act as an interpreter.

- b) **Written Translation:** DHHS offers guidelines for “safe harbors” which you must consider in planning for the translation of written documents.

- Recipients must consider providing written translations of **vital documents** for each eligible language group that constitutes at least 5% or 1,000 LEP individuals, whichever is less, for the populations of persons served or likely to be served by programs in the service area.
- If there are fewer than 50 persons in a language group as determined in above, the recipient does not need to translate vital written materials, but must provide written notice in the primary language of the LEP group of their right to oral interpretation of those written materials, free of cost.

3. Customer Service Language Access Analysis.

- a) General population statistics based on the 2000 Census are accessible on the U. S. Census Bureau web site at <http://www.census.gov>.
 - Hispanic/Latino LEP population. The 2000 Census identified those who "speak English less than very well" and those who "speak English not at all." DWD and DHFS believe this may be an underestimation in Wisconsin because many Hispanic/Latino migrants and immigrants may not have participated in the census survey. If you serve this population, please contact community organizations for a more accurate estimate of LEP Hispanic/Latinos in your service area.
 - For non-Hispanic/Latino LEP populations. You will need to go to the 2000 Census American Fact Finder, as well as other sources such as the Department of Public Instruction (DPI) LEP Pupil database that are categorized by language and school district. Other sources may come from community organizations, mutual assistance associations, and faith-based organizations in your service area.
 - DWD Demographic analysis. The DWD demographers overlaid several census databases to come to a conclusion of where LEP populations will need possible translation of vital documents.
http://www.dwd.state.wi.us/dws/civil_rights/cr0406/lep_method.htm
http://www.dwd.state.wi.us/dws/civil_rights/cr0406/lep_pa.pdf
 - Periodically check the DHFS and DWD websites for new reference material.
 - Other Data Resources. Depending on the recipient's eligible customer population, the recipient will need to refer to data sources beyond the 2000 Census.
 - Department of Public Instruction (DPI):
<http://www.dpi.state.wi.us/dlsea/equity/pdf/censusdt.pdf>
http://www.dpi.state.wi.us/dpi/dlsea/equity/pdf/biling3_01_census_dist.pdf
 - Department of Administration: Data for linguistically isolated households.
http://www.doa.state.wi.us/docs_view2.asp?docid=406
 - Continue to be aware of recent LEP refugee and immigrant populations in your service area that may not yet be reflected in data sources.

4. Identification of and Services for LEP Language Groups. The description of your policy should reflect the presence of LEP language groups you have identified as individuals who are eligible for your programs and services.
5. LEP Policy Statement and Notification. Every recipient must have an LEP Policy statement that describes the LEP responsibilities of the recipient as both an employer and a service provider. If using the model LEP Policy Statement provided in Attachment II of the Civil Rights Compliance Plan, attach it to your Plan, including all translations needed in accordance with your agency's LEP requirements for vital document translation in your service area. You are encouraged to use this model statement and the translations as provided in Attachment II of the Civil Rights Compliance Plan. Translations of the model into additional languages are available on the DWS CRC web site at:
http://www.dwd.state.wi.us/dws/civil_rights/default.htm.

If not using the model LEP Policy Statement and translations, submit your agency's LEP policy statement as Attachment II of your Plan. It must include the same information as the model, including non-discrimination towards protected groups covered under federal and state laws. It must be provided in the languages applicable to your agency's LEP requirements for vital document translation in your service area. Copies of the completed and signed policy must be posted for the public.

6. Designation of LEP Coordinator. Each recipient must identify an individual to function as the LEP Coordinator. It may be beneficial to designate the EO Coordinator to be the LEP Coordinator because the civil rights responsibilities and the knowledge base are similar.
7. Access to Services. Recipients are responsible to assure that both their facilities and programs are accessible to persons with limited English proficiency. They must also be responsible for their subcontractors' compliance with the LEP requirements.
8. Discrimination Complaint/Grievance Procedure. The recipient must develop and implement an effective system for handling complaints and grievances concerning language access. This may be a part of the agency's Equal Opportunity compliant procedure. If using the model Discrimination Complaint Form and Process provided in Attachment III of the Civil Rights Compliance Plan, attach it to your Plan, including all translations needed in accordance with your agency's LEP requirements for written translation of vital documents in your service area. You are encouraged to use this model Discrimination Complaint Forms and Process and the translations as provided in Attachment III of the Civil Rights Compliance Plan. Translations of the complaint form in additional languages are available on the DWS CRC Website.

If not using this model Discrimination Complaint Forms and Process and translations, submit your agency's Discrimination Complaint Form and Process as Attachment III of your Plan. It must include the same information as the model, and it must be provided in the languages applicable to your agency's LEP requirements for written translation of vital documents in your service area. Copies of the policies that are posted for the public must be completed and signed.

9. Self-Evaluation. The Plan provides a list of the minimum requirements for an annual self-assessment.

VII. Attachments 1 to 4 to the Civil Rights Compliance Plan:

Attachment 1	<u>Model Equal Opportunity Policy Statement</u>
Attachment 2	<u>Model Limited English Proficiency Policy</u>
Attachment 3	<u>Model Discrimination Complaint Forms and Process</u>
Attachment 4	<u>Letter of Assurance</u> for recipients who have fewer than 25 employees or contract totals of less than \$25,000.